
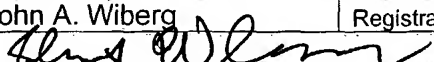


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PTO/SB/05 (08-00)

UTILITY PATENT APPLICATION TRANSMITTAL		Attorney Docket No. 14410US03	
(Only for new nonprovisional applications under 37 CFR 1.53(b))		First Inventor Koenck et al.	
		Title	MODULAR PORTABLE DATA PROCESSING TERMINAL FOR USE IN A RADIO FREQUENCY COMMUNICATION NETWORK
		Express Mail Label No.	EL 848969192 US
APPLICATION ELEMENTS		Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA. 22313-1450	
See MPEP chapter 600 concerning utility patent application contents.		ADDRESS TO:	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)		7. <input type="checkbox"/> CD-Rom or CD-R in duplicate, large table or Computer Program (Appendix)	
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		8. Nucleotide and/or Amino Acid sequence Submission (if applicable, all necessary)	
3. <input checked="" type="checkbox"/> Specification [Total Pages 100] (preferred arrangement set forth below) -Descriptive title of the invention -Cross Reference to Related Applications -Statement Regarding Fed sponsored R&D -Reference to sequence listing, a table, or a computer program listing appendix -Background of the Invention -Brief Description of the Drawings (if filed) -Detailed Description -Claim(s) -Abstract of the Disclosure		a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies	
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 29]		ACCOMPANYING APPLICATION PARTS	
5. Oath or Declaration [Total Pages] a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. <input type="checkbox"/> DELETION OF INVENTORS Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).		9. <input type="checkbox"/> Assignment Papers (cover sheet & documents(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of (when there is an assignee) Attorney 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations 13. <input checked="" type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input type="checkbox"/> Request and Certification under 35 U.S.C. 122(b) (2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input type="checkbox"/> Other:	
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76			
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: 09/597,719 Prior application information: Examiner: Jamara A. Franklin Group/ART Unit: 2876 For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.			
18. CORRESPONDENCE ADDRESS			
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Name (Print/type)	John A. Wiberg	Registration No. (Attorney/Agent)	44,401
Signature		Date	July 18, 2003

17537 U.S. PTO
10/622617
07/18/03



PTO/SB/17 (11-00)

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**FEE TRANSMITTAL
for FY 2003**

Patent Fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$750.00)

Complete if Known

Application Number	unassigned
Filing Date	herewith
First Named Inventor	Koenck
Examiner Name	unassigned
Group Art Unit	unassigned
Attorney Docket No.	14410US03

METHOD OF PAYMENT		FEE CALCULATION (continued)																									
1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:		3. ADDITIONAL FEES																									
Deposit Account Number: 13-0017 Deposit Account Name: McAndrews Held & Malloy, Ltd.																											
<input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27																											
2. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other																											
FEE CALCULATION																											
1. BASIC FILING FEE																											
<table><thead><tr><th>Large Entity Fee Code (\$)</th><th>Small Entity Fee Code (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>1001 750</td><td>2001 375</td><td>Utility filing fee</td><td>750.00</td></tr><tr><td>1002 330</td><td>2002 165</td><td>Design filing fee</td><td></td></tr><tr><td>1003 520</td><td>2003 260</td><td>Plant filing fee</td><td></td></tr><tr><td>1004 750</td><td>2004 375</td><td>Reissue filing fee</td><td></td></tr><tr><td>1005 160</td><td>2005 80</td><td>Provisional filing fee</td><td></td></tr></tbody></table>		Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid	1001 750	2001 375	Utility filing fee	750.00	1002 330	2002 165	Design filing fee		1003 520	2003 260	Plant filing fee		1004 750	2004 375	Reissue filing fee		1005 160	2005 80	Provisional filing fee			
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2. EXTRA CLAIM FEES																											
<table><thead><tr><th>Total Claims</th><th>Extra Claims</th><th>Fee from below</th><th>Fee Paid</th></tr></thead><tbody><tr><td>19 - 20** =</td><td>0 x</td><td>18.00 =</td><td>0.00</td></tr><tr><td>Independent Claims 2 - 3** =</td><td>0 x</td><td>84.00 =</td><td>0.00</td></tr><tr><td>Multiple Dependent</td><td></td><td></td><td>0.00</td></tr></tbody></table>		Total Claims	Extra Claims	Fee from below	Fee Paid	19 - 20** =	0 x	18.00 =	0.00	Independent Claims 2 - 3** =	0 x	84.00 =	0.00	Multiple Dependent			0.00										
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**or number previously paid, if greater; For Reissues, see above																											
		SUBTOTAL (3) (\$0.00)																									

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	John A. Wiberg	Registration No. (Attorney or Agent)	44,401
Telephone		Telephone	312 775 8000
Signature		Date	July 18, 2003

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